

Campaign Finance Tracking Form for Local Election Officials

Call OCPF with campaign finance questions at 617-979-8300

Candidate or Committee Pamela F. Conte Year 2015
Report: Pre-Preliminary Pre-Election 30-Day Year-End

Organization / Providing Materials / Notification *

Organizational form provided to candidate or committee (M101, M101BQ, M101PC)
 Campaign finance report form provided to candidate or committee (M102)
 Summary of the campaign finance law provided (OCPF guide booklet)
 Filing notice (includes reporting dates, due dates and language concerning late fines)
 Pre-Preliminary Pre-Election 30-Day Year-end

*All forms, guides and notices can be delivered by e-mail

Inspecting Reports

The campaign finance law requires local election officials to "inspect" M102 and M102-0 campaign finance reports within 30 days of a due date.

Correct dates for the relevant reporting period
 Signatures
 Positive ending balance
 If the M102-0 form is filed, the candidate does not have a committees and has not received any contributions, made any expenditures or incurred any obligations during the reporting period, and does not have a campaign fund in existence.

Contributions (Monetary receipts and in-kind contributions)

Names and Addresses for contributions of more than \$50
 Occupation and Employer for contributions of \$200 or more
 No contributions from corporations, business partnerships, LLCs or LLPs
 No contributions from individuals or PACs for more than \$500 (see OCPF's limits chart for other limits)

Expenditures

Vendor Names and Addresses for expenditures of more than \$50
 Purpose information is disclosed
 Reimbursements form (R-1s) filed for reimbursements

Date of Inspection 10/23/15



2015OCT23pm03:31 HAV CITYC

Form CPF M101: STATEMENT OF ORGANIZATION CANDIDATE'S COMMITTEE MUNICIPAL FORM

Office of Campaign and Political Finance

File with: City / Town Clerk or Election Commission

NOTICE IS HEREBY GIVEN in accordance with the provisions of General Laws, Chapter 55, as amended, of the organization of a candidate's committee as follows:

CANDIDATE:	Full Name: <u>Pamela Farley Conte</u>
	Residential Address: <u>72 Greenlawn Avenue</u>
	City / State / Zip: <u>Haverhill</u> MA <u>01832-4433</u>
	E-Mail Address: <u>Conteforsc@gmail.com</u> Phone #: _____
	Party Affiliation: _____ (If applicable)
OFFICE SOUGHT/PURPOSE:	
	Title: <u>School Committee</u>
	District: <u>Haverhill</u>

COMMITTEE:	Name of Committee: <u>Conte for School Committee</u> <small>(The name of the committee must include the candidate's last name)</small>
	Committee Mailing Address: <u>72 Greenlawn Avenue</u>
	City / State / Zip: <u>Haverhill</u> MA <u>01832-4433</u> Phone #: <u>978-373-1685</u>

OFFICERS:																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Chairman:</td> <td><u>Melody Campiglio</u></td> </tr> <tr> <td>Residential Address:</td> <td><u>77 Greenlawn Avenue</u></td> </tr> <tr> <td>City / State / Zip:</td> <td><u>Haverhill</u> MA <u>01832</u></td> </tr> <tr> <td>Phone #:</td> <td><u>978-374-1819</u></td> </tr> </table>	Chairman:	<u>Melody Campiglio</u>	Residential Address:	<u>77 Greenlawn Avenue</u>	City / State / Zip:	<u>Haverhill</u> MA <u>01832</u>	Phone #:	<u>978-374-1819</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Treasurer*:</td> <td><u>Leslie M. Crowe</u></td> </tr> <tr> <td>Residential Address:</td> <td><u>49 Gary Avenue</u></td> </tr> <tr> <td>City / State / Zip:</td> <td><u>Haverhill</u> MA <u>01832</u></td> </tr> <tr> <td>Phone #:</td> <td><u>978-373-5472</u></td> </tr> <tr> <td colspan="2"><small>*A public employee may not serve as treasurer of any political committee (see reverse).</small></td> </tr> </table>	Treasurer*:	<u>Leslie M. Crowe</u>	Residential Address:	<u>49 Gary Avenue</u>	City / State / Zip:	<u>Haverhill</u> MA <u>01832</u>	Phone #:	<u>978-373-5472</u>	<small>*A public employee may not serve as treasurer of any political committee (see reverse).</small>	
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Residential Address:	_____																		
City / State / Zip:	_____																		
Phone #:	_____																		

(Complete and attach a Form CPF MA 101, if necessary, with other officers and finance committee, if any.)

I hereby consent to the filing of this committee. I understand that a candidate shall not give consent to the organization of more than one committee on his/her behalf. I am aware that candidates are required to keep detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election.

SIGNED UNDER THE PENALTIES OF PERJURY:

Candidate's signature

Date: 9/26/15

I hereby accept the office of Treasurer of the above-named committee. I affirm that I am not a public employee as defined by M.G.L. c. 55, s. 13. I understand that: 1) I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports and keeping detailed accounts and records of all campaign finance activity for a period of six years from the date of the relevant election; 2) if after my acceptance of this office I become an appointed public employee, I must resign this position and notify OCPF of my resignation; and 3) a candidate may not serve as treasurer of the political committee organized on his/her behalf.

SIGNED UNDER THE PENALTIES OF PERJURY:

Treasurer's signature

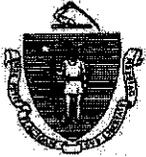
Date: 9/26/15

I hereby accept the office of Chairman of the above-named committee.

SIGNED UNDER THE PENALTIES OF PERJURY:

Chairman's signature

Date: 9/26/15



Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2015 OCT 23 PM 03:31 HAV CITY VC

File with: City or Town Clerk or Election Commission

11/15 P.A.C.

Fill in Reporting Period dates: Beginning Date: 07/31/2015 Ending Date: 10/23/2015
10/16/15

Type of Report: (Check one)

- 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution

Pamela F Conte
Candidate Full Name (if applicable)

School Committee Haverhill
Office Sought and District

72 Greenlawn Ave, Haverhill, MA 01832
Residential Address

Telephone Number (optional): _____

Conte For School Committee
Committee Name

Leslie Crowe
Name of Committee Treasurer

72 Greenlawn Ave, Haverhill, MA 01832
Committee Mailing Address

Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	1,126.26
Line 3: Subtotal (line 1 plus line 2)	1,126.26
Line 4: Total expenditures this period (page 5, line 14)	1,126.26
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	1,126.26
Line 8: Name of bank(s) used:	<u>None</u>

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Leslie Crowe

(Treasurer's signature)

Date: 10-23-15

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Pamela F. Conte

(Candidate's signature)

Date: 10-23-15

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/16/2015	Pamela Conte 72 Greenlawn Ave Haverhill, MA 01832	616.88	Loan
10/23/2015	Pamela Conte 72 Greenlawn Ave Haverhill, MA 01832	509.38	Loan
Line 9: Total Receipts over \$50 (or listed above)		1,126.26	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,126.26	← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
10/16/2015	FotoFactory	25 Washington Square Haverhill, MA 01830	Head Shot for Campaign	116.88
10/16/2015	Loral Press, Inc	7B Main Street Atkinson, NH 03811	Lawn Signs Deposit	500
10/23/2015	Loral Press, Inc.	7B Main Street Atkinson, NH 03811	Lawn Signs Balance	509.38
Line 12: Total Expenditures over \$50 (or listed above)				1,126.26
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				1,126.26

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
10/16/2015	Pamela Conte	72 Greenlawn Ave Haverhill, MA 01832	Expenses of Campaign	616.88
10/23/2015	Pamela Conte	72 Greenlawn Ave Haverhill, MA 01832	Expenses of Campaign	509.38
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	1,126.26